

## SYBRON DENTAL SPECIALTIES

# Section III - 510(k) Summary of Safety and Effectiveness

### Submitter:

Sybron Dental Specialties, Inc. 1717 W. Collins Avenue Orange, California 92867 (714) 516-7484 - Phone (714) 516-7488 - Facsimile Colleen Boswell - Contact Person

Date Summary Prepared: August 1998

#### Device Name:

- Trade Name B-System Silicone
- Common Name Silicone Impression Material
- Classification Name Impression Material, per 21 CFR § 872.3660

### Devices for Which Substantial Equivalence is Claimed:

• Heraeus Kulzer, Inc., CutterSil® Polysiloxane Impression Materials

#### Device Description:

The device is a condensation cured silicone impression material designed to be used for full dentures, partial dentures, inlays, onlays, crowns and bridges.

### Intended Use of the Device:

The intended use of B-System Silicone is for dental impressions of full dentures, partial dentures, inlays, onlays, crowns and bridges.

#### Substantial Equivalence:

B-System Silicone is substantially equivalent to several other legally marketed devices in the United States. The condensation cured elastomeric impression material marketed by Heraeus Kulzer, Inc. functions in a manner similar to and is intended for the same use as the product manufactured by Kerr Corporation.



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Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Colleen Boswell Senior Regulatory Affairs Specialist Sybron Dental Specialties, Incorporated 1717 W. Collins Avenue Orange, California 92867

Re: K982917

Trade Name: B-System Silicone

Regulatory Class: II Product Code: ELW

Dated: August 18, 1998 Received: August 19, 1998

Dear Ms. Boswell:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fqa.gov/cdrh/dsmamain.html".

Sincerely yours,

Timethy A. Ulatowski

Director

Division of Dental, Infection Control, and General Hospital Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

Section I - Indications for Use

510(k) Number:

K982917

**Device Name:** 

**B-System Silicone** 

Indications for Use:

B-System Silicone is a condensation cured silicone impression material designed to be used for full dentures, partial dentures, inlays, onlays, crowns and bridges.

(Division Sign-Off)
Division of Dental, Infection Control, and General Hospital Devices

510(k) Number \_\_\_\_\_